COUNTY	OF SAN DIEGO - WRITT	EN DICCI OCIMI	3			
				CD actuark & Cha	е Энж- Рабедон Ті	me Stamp)
	O SECTION 1000.1 OF THE SAN DI		R)	BOARD OF S	"PERMISORS	
FILER INFO	RMATION: (Please type or print i	n ink)	LA DETOU ROCCO	/.		
(NAME OF CO	TCILIBLE , HANAGING PRIX ONTRACTOR [INDIVIDUAL OR ENT	CIPALINE SEE 11	Masion Hace	13 1984 8	PM 2 01	
	-	1) 200	,			
(TELEPHONI	E NO INCLUDING AREA CODE	619)718-950	T/	TRUMAS J.	PASTUSZKA	
□CONTD A CT	OR □LOBBYIST (Check one)			Thur enter	ERVISORS	
			n 1.40	OF SOFE	CAUCHA	
	IENTAL FORM (Check if pres	100	Supv. Mtg.)		- ایما -	
	E COVERS PERIOD FROM ///	708 TO 5//2	109		. Date: 5/12/0	29
(Disclosure ii	nust cover the year preceding the	date of the disclosure) GETALD M. TTZ	111015	Agenda Ite		
**		KEYSER MARG		Communic	ation Rec'd.:	
NAME AND	Address of Contractor:	1660 HOTEL CAR	CELE NO STE	7		
		SAN MITGO, C	A 92/08	, . -	ity Department Co くり W, キェムィ	ntact:
ADDRESS O	F REGISTERED LOBBYIST (IF	APPLICABLE)			t Dept. Gene	ral Servic
				Thome.	30 311 00	
REPORTABLE	E DISCLOSURE: (Check Ye	ov No bolovi)				
KEPURTABLE	DISCLOSURE: (Check Ye.	s or No below)	118 11 11 11 11 11 11 11 11 11 11 11 11			
□ Y 1	ES If you HAVE gifts applicable, and Sec	and/or contribution tions C, D, and E	ns to report, plo	ease complete	e Sections A and/	or B, as
V N				•		
X N				, please comp	lete Section D an	d E only
A. REP	ORTABLE DISCLOSURE - GIFTS *	(AGGREGATING \$50.0	00 or more)			
NA	ME OF RECIPIENT	NAME & TITLE	OF DONOR	D	D	
(Name of)	Board Member or immediate			DATE OF	DESCRIPTION	AMOUNT/
`	family member)			GIFT	OF GIFT	VALUE
 * Attach addit 	tional pages if necessary					•
D Dray	ODT IN P DIGGI COURT CARRY	c. Co. To.	k (
	ORTABLE DISCLOSURE - CAMPAI					
	ECIPIENT (Name of Board Mem	ber NAME	& TITLE OF	т	DATE OF	
or Controlled	Committee receiving campaign	CON	TRIBUTOR			AMOUNT
contribution)				CON	TRIBUTION	
* Attach addit	tional pages if necessary					
C. TOTA	AL NUMBER OF PAGES (includi	ng this page)				
	REPORTER OF TAGES (Including	ig tills page,		<u> </u>		
D. VERI	FICATION					
I hav	e used all reasonable diligence in	nrenaring this disclosi	re I declare uno	der nenalty of n	eriury that I have re	viewed this
discle	esure and to the best of my know	ledge the information	contained herein	and in any atta	ched schedules is to	ue and
Comp	olete.			und m uny uttu	oned senedules is th	uc ana
	4					
Signature of	Lobbyist or Signature & Ti	la of Dayson Cubus		f C	-4	
Executed at:	Lobbyist of Signature & 11	ile of Letson Submi	imagiosti giini	re for Contra	ctor)	4/09
Executed at:	1660 HOTEL CIRCL	ENO, OR AG	(CI	ity and State)	Date:	7-7
		9408				
E. CON	TRACTOR'S CERTIFICATION					
The c	contractor and the contractor's reg	istered lobbyist, if any	, have complied v	with the disclos	sure requirements in	posed by
_San I	Diego County Charter section 100	0.1.	•		•	. ,
			م ب	301.161 0	L 7.	1/20
		MANIL	GING R	The way to be		107
Signature of	Contractor or Representati	ve T	Fitle		Date	<i>,</i> —

COUNTY OF SAN DIEGO - WRITTEN DISCLOSURE (PURSUANT TO SECTION 1000.1 OF THE SAN DIEGO COUNTY CHARTER)

FILER INFORMATION: (Please type or print in ink)

(NAME OF CONTRACTOR [INDIVIDUAL OR ENTITY] OR REGISTERED LOBBYIST)

Additional Page:

A. REPORTABLE DISCLOSURE – GIFTS (AGGREGATING \$50.00 OR MORE)								
NAME OF RECIPIENT (Name of Board Member or immediate family member)	NAME & TITLE OF DONOR	DATE OF GIFT	DESCRIPTION OF GIFT	AMOUNT/ VALUE				

NAME OF RECIPIENT (Name of Board Member or Controlled Committee receiving campaign contribution)	NAME & TITLE OF CONTRIBUTOR	DATE OF CONTRIBUTION	AMOUNT

New: 01/10/01